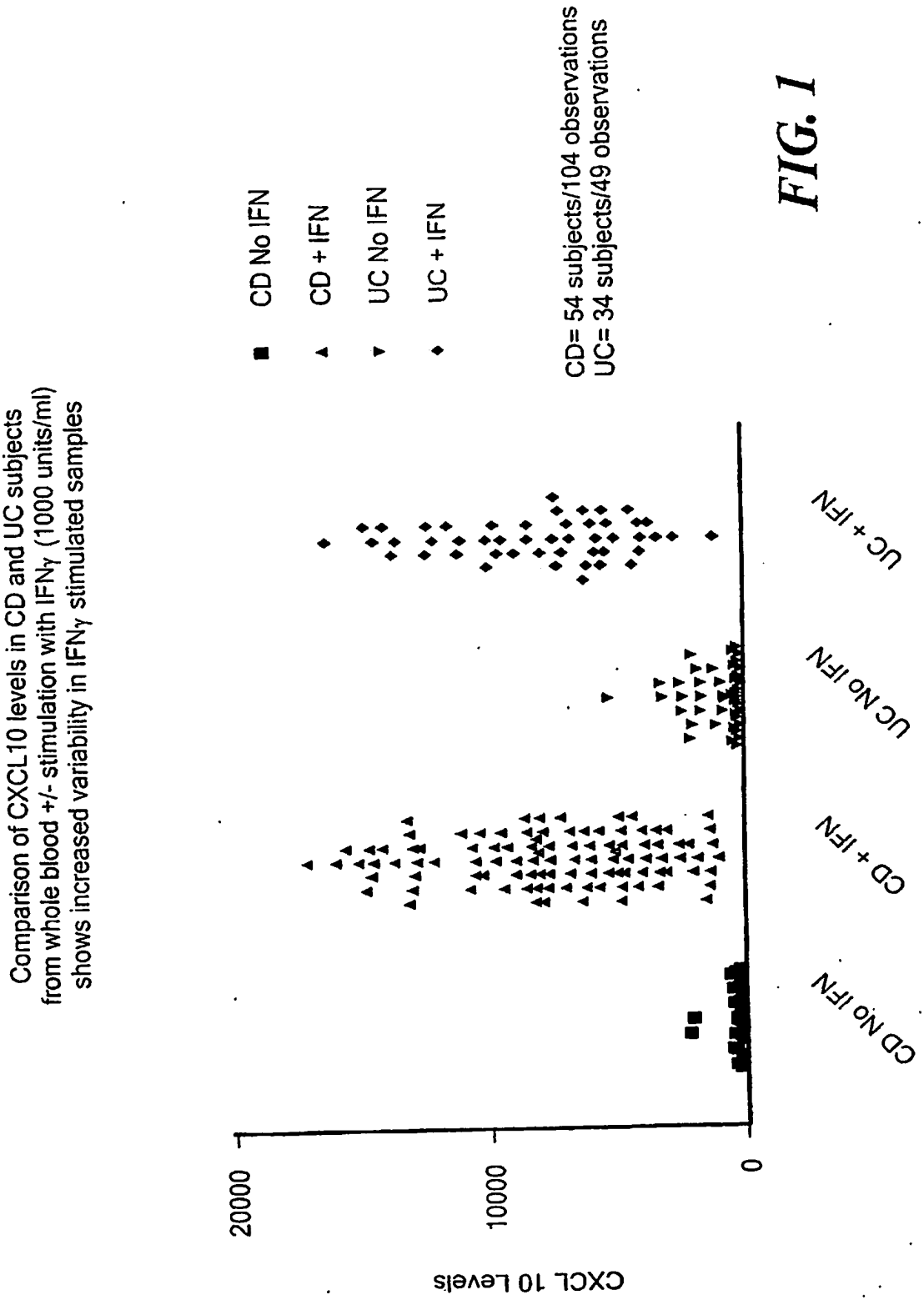
Comparison of CXCL10 levels in CD and UC subjects
from whole blood +/- stimulation with IFNγ (1000 units/ml)
shows increased variability in IFNγ stimulated samples
CD No IFN
CD + IFN
UC No IFN
UC + IFN
CD= 54 subjects/104 observations
UC= 34 subjects/49 observations
CXCL 10 Levels
20000
10000
0
CD No IFN
CD + IFN
UC No IFN
UC + IFN

FIG. 1

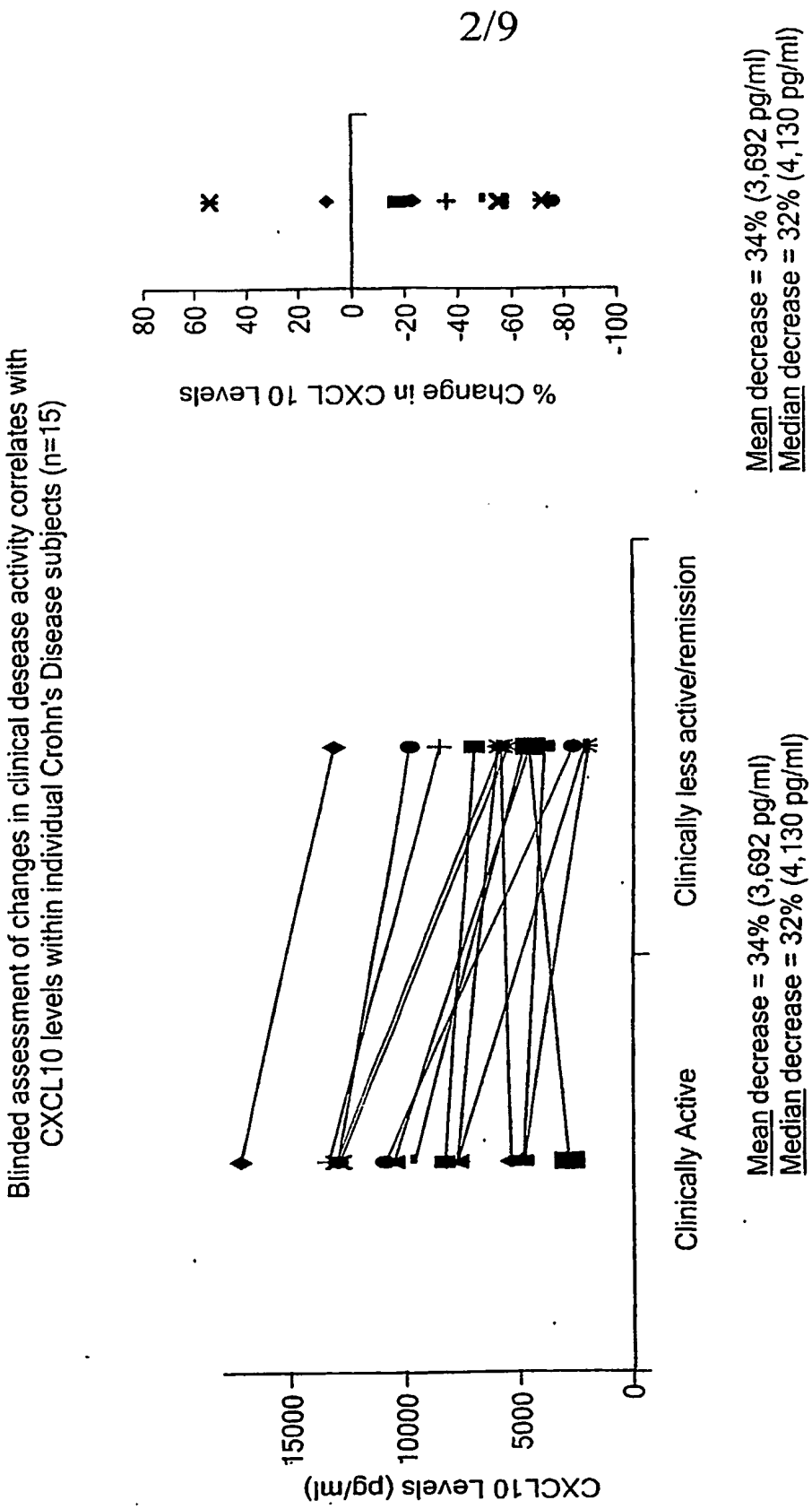
Blinded assessment of changes in clinical desease activity correlates with
CXCL10 levels within individual Crohn's Disease subjects (n=15)
CXCL10 Levels (pg/ml)
15000
10000
5000
0
Clinically Active
Clinically less active/remission
Mean decrease = 34% (3,692 pg/ml)
Median decrease = 32% (4,130 pg/ml)
% Change in CXCL 10 Levels
80
60
40
20
0
-20
-40
-60
-80
-100
Mean decrease = 34% (3,692 pg/ml)
Median decrease = 32% (4,130 pg/ml)

FIG. 2A

FIG. 2B

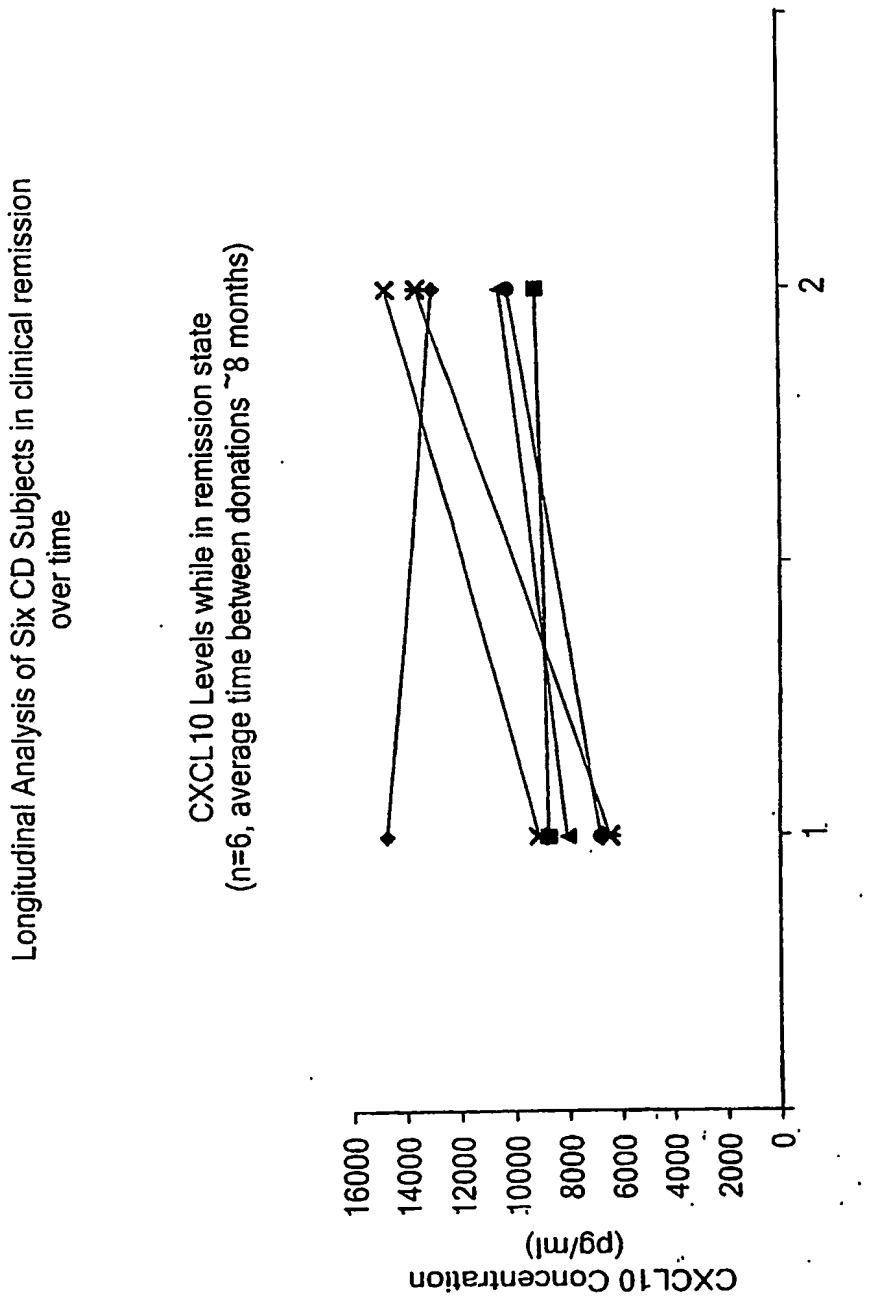
Longitudinal Analysis of Six CD Subjects in clinical remission over time
CXCL10 Levels while in remission state
(n=6, average time between donations ~8 months)
CXCL10 Concentration (pg/ml)
16000
14000
12000
10000
8000
6000
4000
2000
0
1
2
Donations

FIG. 3

Analysis of Effects of Medication Usage on CXCL10 levels in CD subjects shows significant decreases in Steroid and Azathioprine/6MP use.

Analysis	Estimated Mean CXCL10	Standard Error	p-value
Steroids			
Yes	6691	705	
No	8505	464	
Difference	-1814	736	0.014
Antibiotics			
Yes	6626	1578	
No	8374	433	
Difference	-2048	1666	0.219
5ASA			
Yes	8081	471	
No	8139	817	
Difference	-58	865	0.947
Infliximab			
Yes	8065	474	
No	8411	860	
Difference	-346	944	0.714
Azathioprine/6MP			
Yes	8872	667	
No	7435	422	
Difference	1438	681	0.035

Multiple regression analysis for use of both Steroids and Aza/6MP was also statistically significant (Steroids -1868, p=0.009; due to Aza/6MP 1495 p=0.033).

The generalized estimating equation (GEE) approach to linear regression was used to estimate the effect on CXCL10 levels in 54 CD subjects with 105 observations.

FIG. 4

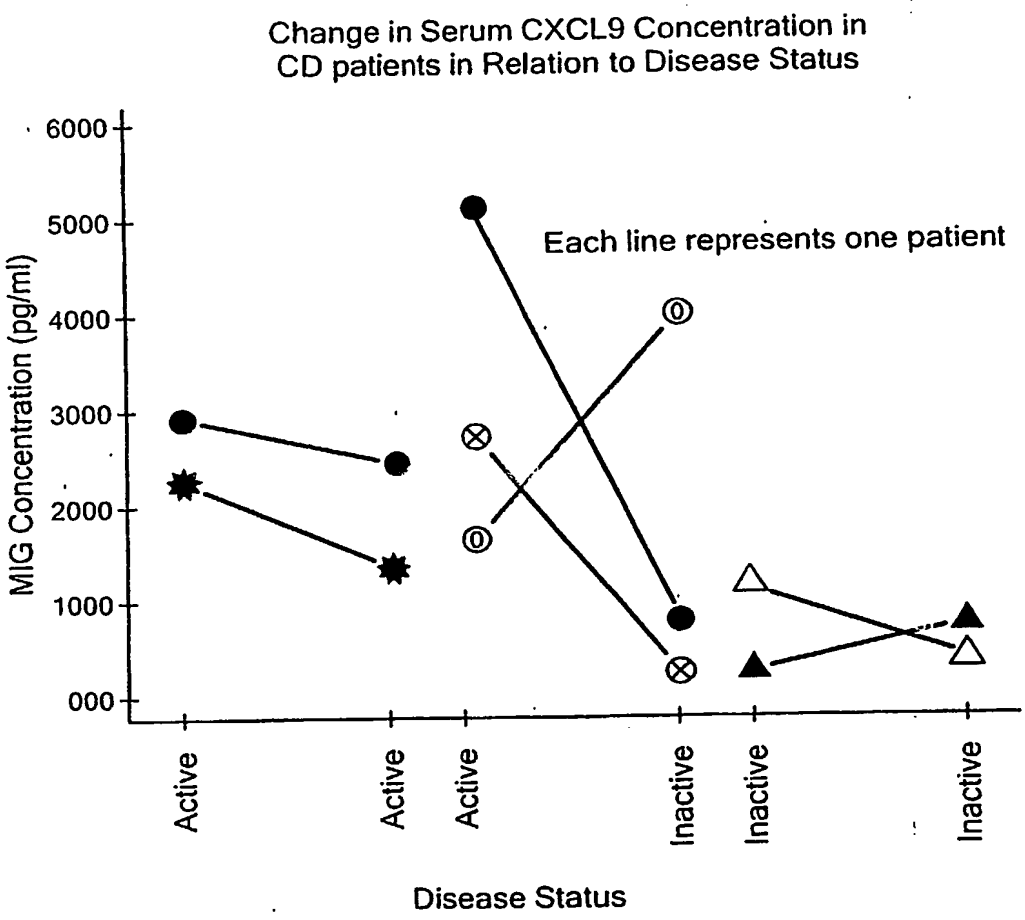
Change in Serum CXCL9 Concentration in
CD patients in Relation to Disease Status
MIG Concentration (pg/ml)
6000
5000
4000
3000
2000
1000
000
Each line represents one patient
Active
Active
Active
Inactive
Inactive
Inactive
Disease Status

FIG. 5

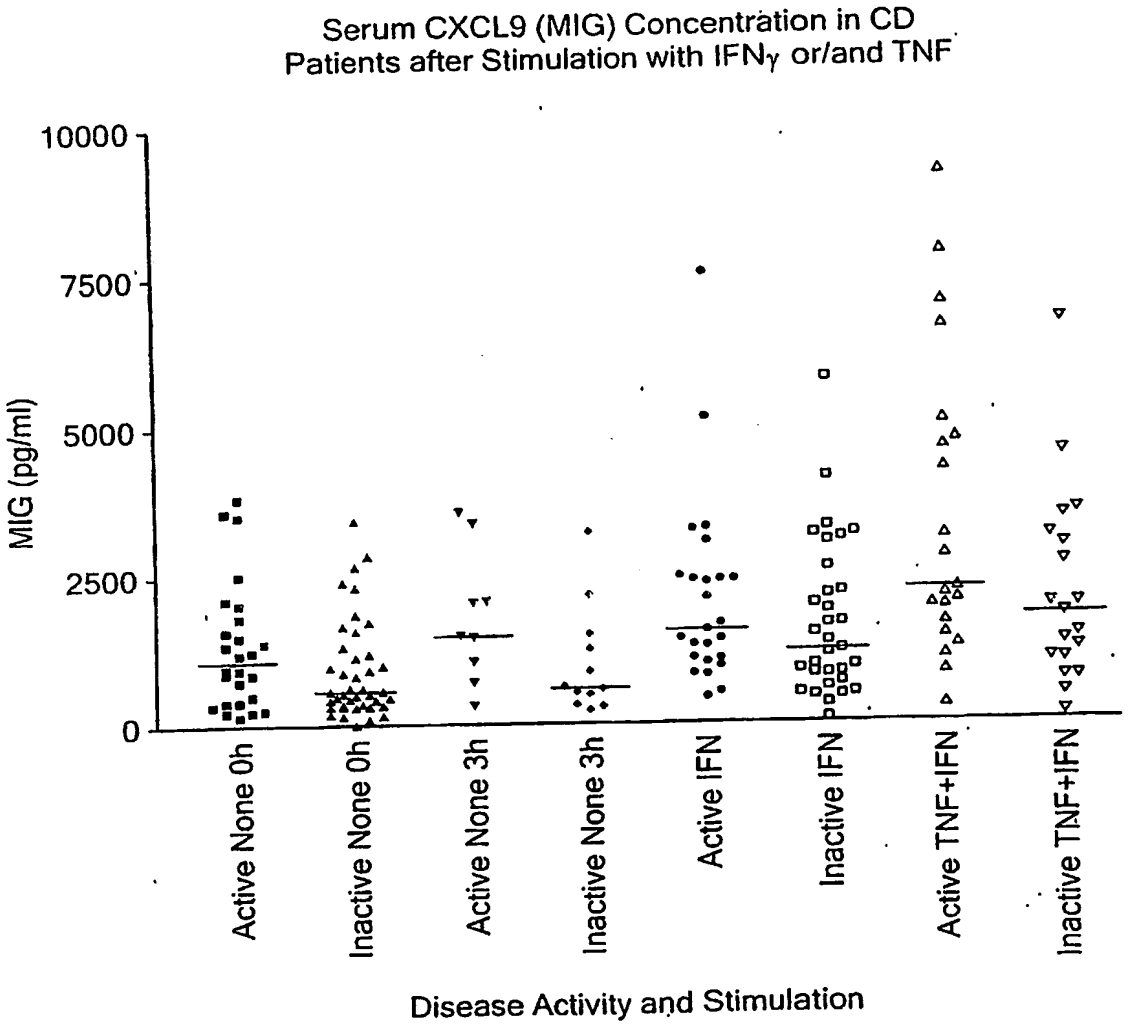
Serum CXCL9 (MIG) Concentration in CD Patients after Stimulation with IFNγ or/and TNF
MIG (pg/ml)
10000
7500
5000
2500
0
Active None 0h
Inactive None 0h
Active None 3h
Inactive None 3h
Active IFN
Inactive IFN
Active TNF+IFN
Inactive TNF+IFN
Disease Activity and Stimulation

FIG. 6

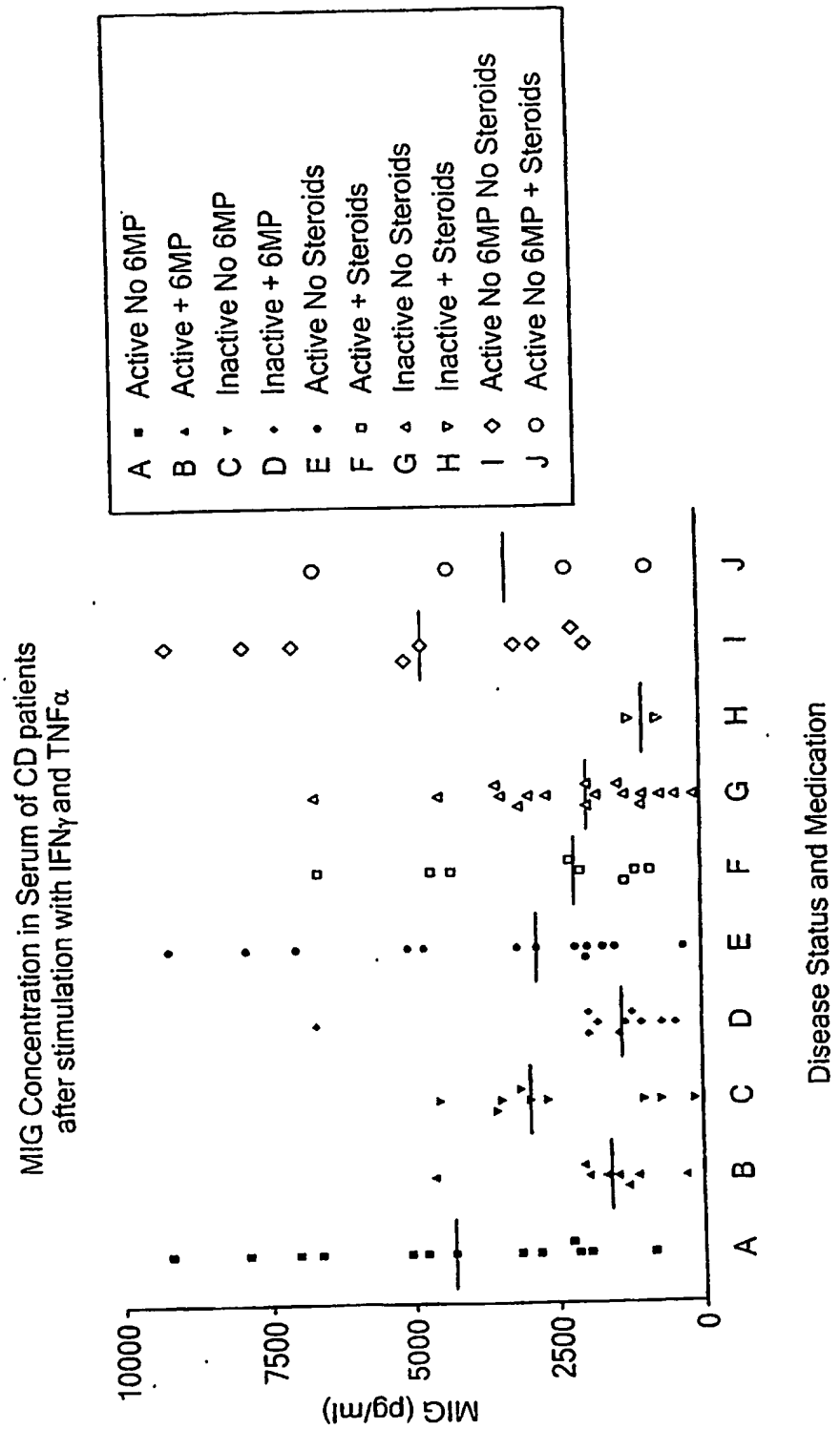
MIG Concentration in Serum of CD patients after stimulation with IFNγ and TNFα
MIG (pg/ml)
10000
7500
5000
2500
0
A B C D E F G H I J
Disease Status and Medication
A ■ Active No 6MP
B ▲ Active + 6MP
C ▼ Inactive No 6MP
D ◆ Inactive + 6MP
E ● Active No Steroids
F ▫ Active + Steroids
G △ Inactive No Steroids
H ▽ Inactive + Steroids
I ◇ Active No 6MP No Steroids
J ○ Active No 6MP + Steroids

FIG. 7

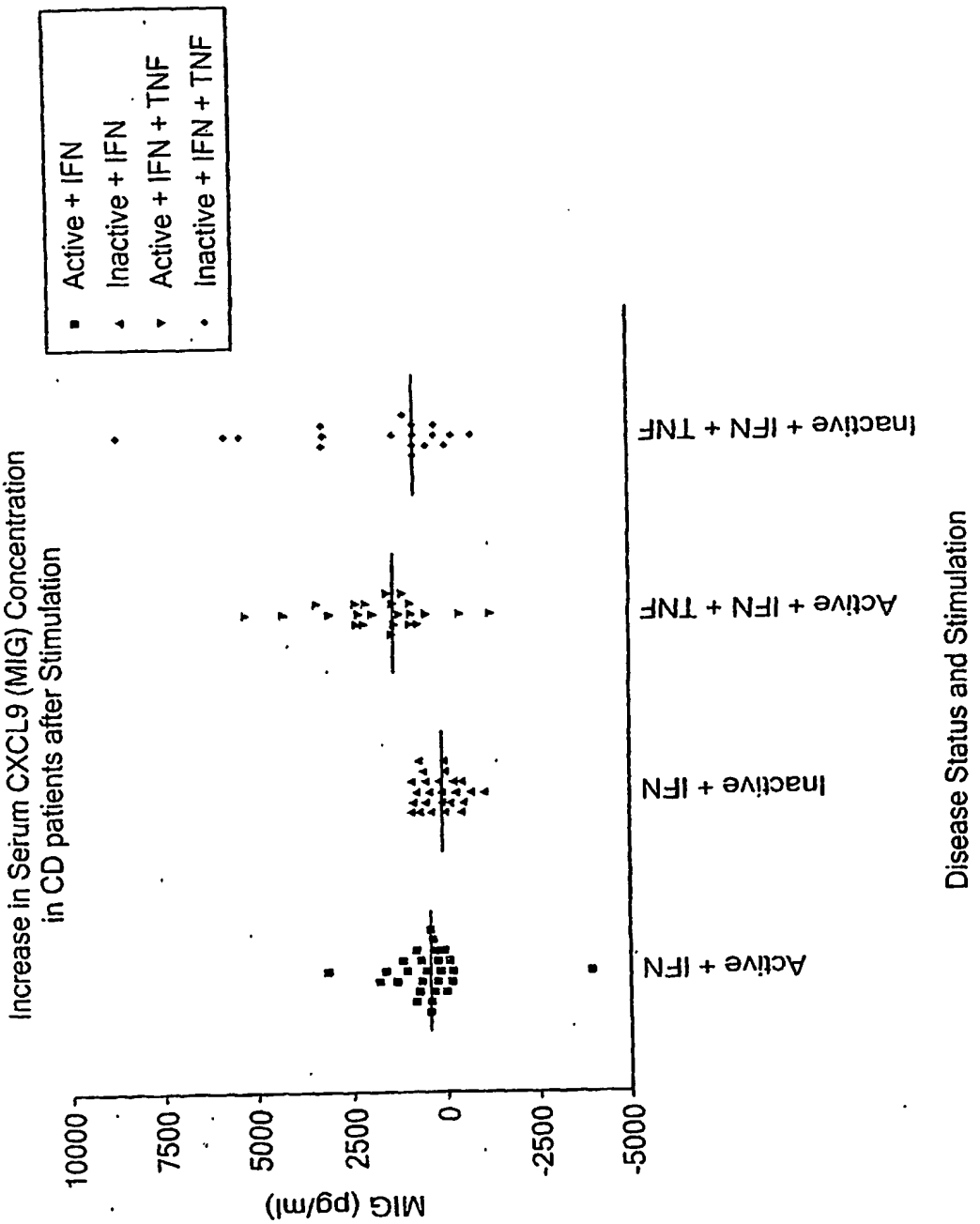
Increase in Serum CXCL9 (MIG) Concentration in CD patients after Stimulation
Active + IFN
Inactive + IFN
Active + IFN + TNF
Inactive + IFN + TNF
MIG (pg/ml)
10000
7500
5000
2500
0
-2500
-5000
Active + IFN
Inactive + IFN
Active + IFN + TNF
Inactive + IFN + TNF
Disease Status and Stimulation

FIG. 8

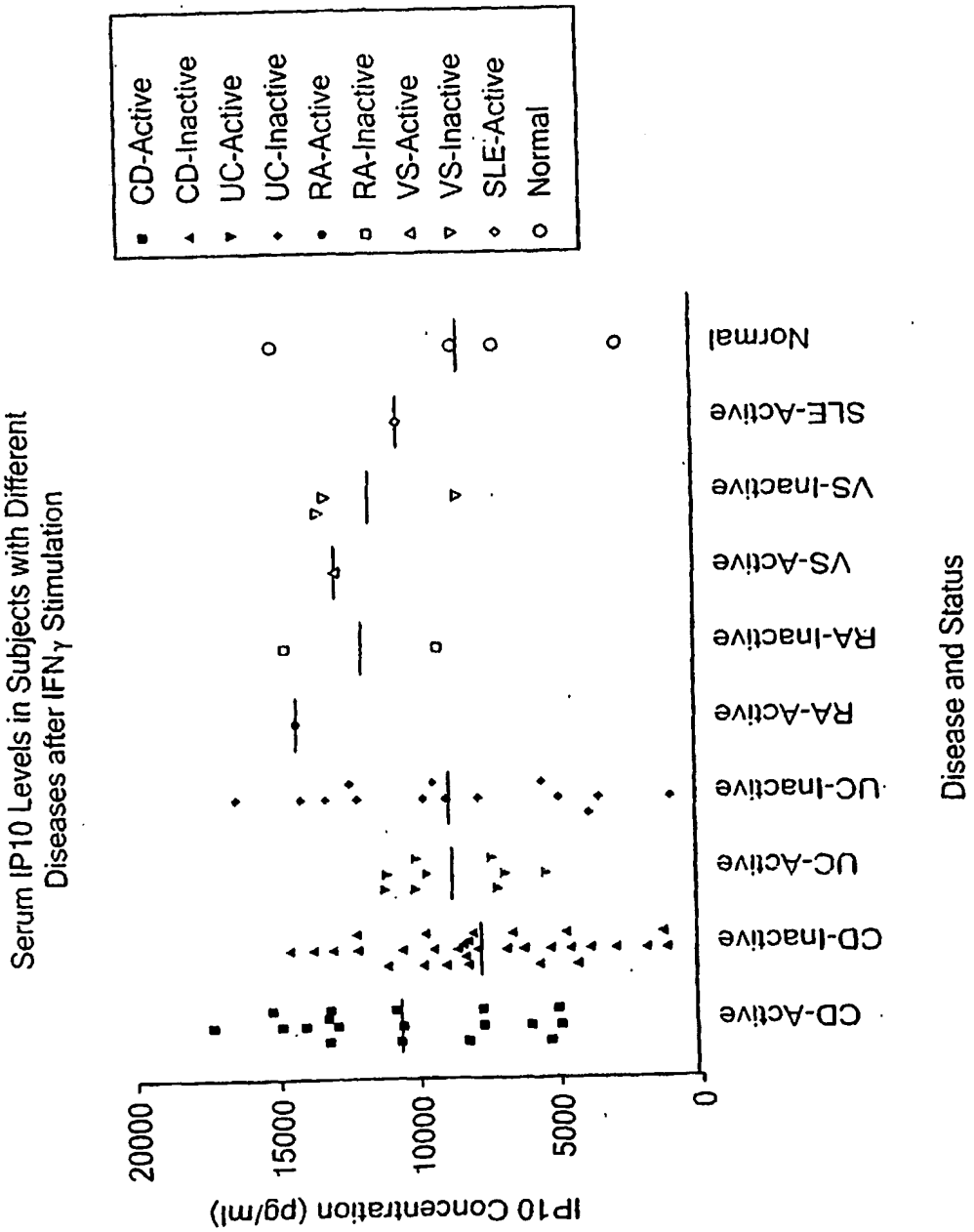
Serum IP10 Levels in Subjects with Different Diseases after IFNγ Stimulation
IP10 Concentration (pg/ml)
20000
15000
10000
5000
0
CD-Active
CD-Inactive
UC-Active
UC-Inactive
RA-Active
RA-Inactive
VS-Active
VS-Inactive
SLE-Active
Normal
Disease and Status

FIG. 9